

7856315

ISSUE SLIP STARTING AREA (SEE INSTRUCTIONS)

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| INITIALS | INITIALS | ID NO. | DATE |
| FEE DETERMINATION O.P.E. CLASSIFIER FORMALITY REVIEW RESPONSE FORMALITY REVIEW | | | |
| [Signature] | | 48 | 6/11 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numbers) C Cancelled A Appeal
 + Restricted O Objected

| Claim | Final | Date | Claim | Final | Date | Claim | Final | Date |
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If more than 150 claims or 10 actions
staple additional sheet here

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